

CREDIT CARD AUTHORIZATION B-29

Development Services

Building Department 1635 Faraday Avenue 760-602-2719 www.carlsbadca.gov

Credit Card Payment Authorization

Company/Person Name:		
I authorize the City of Carlsbad to charge my Visa or Mastercard for payment of services provided as I have indicated below.		
VISA		
	Expiration Date.	
Master Card		
	Expiration Date:	
Total Amount to be Charged:		(Maximun \$5000 charge per
transaction)		
Apply Payment To:		
Cardholders' Name (Please Print)		
Address Where Credit Card Billing Statement Is Sent		
Cardholder's Signature		